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DRINKER BIDDLE & REATH (DC) 1500 K STREET, N.W. SUITE 1100 WASHINGTON, DC 20005-1209				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
WASHINGTON,	DC 20005-1209				, ,,,,	(Depositor's name)	
						(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/490,114	01/24/2000		Hidehiro Ishii		046969-5531	6741	
TITLE OF INVENTION: MEDIUM	RECORDING MED	OIUM, AND SYSTEM	AND METHOD FOR R	ECORDING AND	PRODUCING THE REC	CORDING	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$0	\$0	\$1510	08/11/2010	
EXAMIN	TER	ART UNIT	CLASS-SUBCLASS				
CHEVALIER, ROBERT		2621	386-109000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			2. For printing on the patent front page, list				
	dence address (or Cha	nge of Correspondence	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,    DRINKER_BIDDLE & REATH_LLP				
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND	D RESIDENCE DATA	TO BE PRINTED ON	THE PATENT (print or typ	e)			
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
PIONEER CORPORATION TOKYO, JAPAN							
Please check the appropriate assignee category or categories (will not be printed on the patent):							
4a. The following fee(s) are Issue Fee	submitted:	41	b. Payment of Fee(s): (Plea  A check is enclosed.	Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.			
Publication Fee (No s	ermitted)	Payment by credit care	Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of Copies 4							
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a. Applicant claims S			b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  I from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in				
NOTE: The Issue Fee and P interest as shown by the rec	ords of the United Sta	fred) will not be accepte es Patent/and Trademark	d from anyone other than the Office.	ne applicant; a regist	ered attorney or agent; or th	e assignee or other party in	
Authorized Signature				Date	JULY 19, 2011	0	
Typed or printed name PETER J. SISTARE				Registration No.	,		
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